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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/730,229	12/08/2003		Donald L. Schilling		I-2-0074.8US	2483
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nonprovisional	NO	\$1400	\$300	\$0	\$1700	10/16/2006
EXAMI	NER	ART UNIT	CLASS-SUBCLASS]		
FRANKLIN, JAM	ARA ALZAIDA	2876	235-375000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE InterDigital Technology Corporation 1. Change of correspondence address (or Change of Correspondence Address" (37 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignee data will appear on the patent. If an assignce is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Wilmington, DE						
Please check the appropri	ate assignee category or				orporation or other private gr	
4a. The following fee(s) a X Issue Fee D Publication Fee (N Advance Order - #	o small entity discount p	permitted)	A check is enclosed. Payment by credit car	rd. Form PTO-203	ny previously paid issue fee 8 is attached. rge the required fee(s), any d er 09-0435 (enclose	
5. Change in Entity Stat	s SMALL ENTITY state	ıs. Sec 37 CFR 1.27.			LL ENTITY status, Sec 37 (
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Authorized Signature	My Yhal	Milli		Date	/1/2006 42,584	-
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TRANSMITTAL	Filing Date	December 8, 2003	
FORM	First Named Inventor	Donald L. Schilling	
1 311	Art Unit	2876	
	Examiner Name		
(to be used for all correspondence after initial		Jamara Alzaida Franklin	
Total Number of Pages in This Submission	Attorney Docket Number	I-2-0074.8US	
	ENCLOSURES (Check all	that apply)	
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence At Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks	Status Letter Other Enclosure(s) (please Identify below): Form PTOL-85	
SIGNA	TURE OF APPLICANT, ATTOP	RNEY, OR AGENT	
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Printed name Jeffrey M. Glabicki	<u>' </u>		
Date October 9, 2006	R	deg. No. 42,584	
I hereby certify that this correspondence is being fac-	ERTIFICATE OF TRANSMISSIC simile transmitted to the USPTO or deposited sue Fee, Commissioner for Patents, P. O. Box	ON/MAILING with the United States Postal Service with sufficient postage as first a 1450, Alexandria, VA 22313-1450 on the date shown below:	
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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Fees Paid (\$)

1,712.00

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Total Sheets

4. OTHER FEE(S)

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Non-English Specification, \$130 fee (no small entity discount)

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Other (e.g., late filing surcharge): Issue Fee, Publication Fee and four (4) advance patent copies

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Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 10/730,229 FEE TRANSMITTAI Filing Date December 8, 2003 For FY 2006 First Named Inventor Donald L. Schilling **Examiner Name** Jamara Alzaida Franklin Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2876 **TOTAL AMOUNT OF PAYMENT** 1,712.00 Attorney Docket No. I-2-0074.8US METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 09-0435 Deposit Account Name: InterDigital Communications Corporation For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity Small Entity Application Type** Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 Design 200 100 100 130 50 65 Plant 200 100 300 160 150 80 Reissue 300 150 500 250 600 300 200 Provisional 100 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee Description Fee (\$) Each claim over 20 (including Reissues) 50 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims Extra Claims** Multiple Dependent Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. **Extra Claims** Indep. Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

SUBMITTED BY	1 1 1. Ca 1		
Signature	Why M. MMAA	Registration No. (Attomey/Agent) 42,584	Telephone 215-568-6400
Name (Print/Type	e) Jettrey M. Glabicki		Date October 9, 2006

Number of each additional 50 or fraction thereof

(round up to a whole number) x

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